

Patent Application Data Sheet**Application Information****Application Type:** Regular**Subject Matter:** Utility**Suggested****Classification:****Suggested Group Art****Unit:****CD-ROM or CD-R?:****Number of CD disks:****Number of copies of CDs:****Sequence submission?:****Computer Readable****Form (CRF)?:** Yes**Number of copies of CRF:****Title:** SYSTEM AND METHOD FOR PROCESS GAS
STREAM DELIVERY AND REGULATION USING OPEN
LOOP AND CLOSED LOOP CONTROL**Attorney Docket Number:** 9351-246**Request for Early****Publication?:** No**Request for Non-Publication?:** No**Suggested Drawing Figure:** 1**Total Drawing Sheets:** 2**Small Entity?:** No**Latin Name:**

Variety denomination**name:****Petition included?:** No**Petition Type:****Licensed US Govt.****Agency:****Contract or Grant****Numbers:****Secrecy Order in****Parent Appl.?:****Applicant Information****Inventor Authority Type:** Inventor**Primary Citizenship****Country:** Canada**Status:** Full Capacity**Given Name:** Joseph**Middle Name:****Family Name:** Cargnelli**Name Suffix:****City of Residence:** Toronto**State or Prov. Of****Residence:** Ontario**Country of Residence:** Canada**Street of mailing address:** 18 Fairhaven Drive**City of mailing address:** Toronto

State or Province of**mailing address:** Ontario**Country of mailing address:** Canada**Postal or Zip Code of****mailing address:** M9P 2P6**Inventor Authority Type:** Inventor**Primary Citizenship****Country:** Canada**Status:** Full Capacity**Given Name:** Todd**Middle Name:** A.**Family Name:** Simpson**Name Suffix:****City of Residence:** Brampton**State or Prov. Of****Residence:** Ontario**Country of Residence:** Canada**Street of mailing address:** 809 - 10 Kensington Road**City of mailing address:** Brampton

State or Province of**mailing address:** Ontario**Country of mailing address:** Canada**Postal or Zip Code of****mailing address:** L6T 3V4**Inventor Authority Type:** Inventor**Primary Citizenship****Country:** Canada**Status:** Full Capacity**Given Name:** Stephen**Middle Name:****Family Name:** Burany**Name Suffix:****City of Residence:** Thornhill**State or Prov. Of****Residence:** Ontario**Country of Residence:** Canada**Street of mailing address:** 7 Cypress Pt. Court**City of mailing address:** Thornhill

State or Province of

mailing address: Ontario

Country of mailing address: Canada

Postal or Zip Code of

mailing address: L3T 1V6

Correspondence Information**Correspondence Customer**

Number: 001059

Phone Number: 416-364-7311

(Max. 3 telephone numbers)

Fax Number: (416) 361-1398

E-Mail Address: *imcmillan@bereskinparr.com*

(Max. 3 e-mail addresses)

Representative Information**Representative**

Customer Number: 001059

Domestic Priority Information

Application:	Continuity Type:	Parent Application:	Parent Filing Date:
This Application	Non-provisional of	60/412,587	09/23/02
This Application	Non-provisional of	60/412,548	09/23/02

Assignee Information

Assignee name: Hydrogenics Corporation
Street of mailing address: 5985 McLaughlin Road
City of mailing address: Mississauga
State or Province of
mailing address: Ontario
Country of mailing address: Canada
Postal or Zip Code of
mailing address: L5R 1B8